

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mm</i>	<i>67810</i>	<i>10/5/55</i>
O.I.P.E. CLASSIFIER	<i>C</i>	<i>15</i>	<i>6630</i>
FORMALITY REVIEW	<i>C</i>	<i>100916</i>	<i>10/14/99</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 1000 claims  
staple additional sheet here

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